
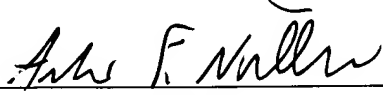


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|--|---|---|
| PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) | | Docket Number (Optional) 2676-4644US |
|  | In re Application of Ostade et al. | |
| | Application Number 09/771,425 | Filed January 26, 2001 |
| | For EUKARYOTIC CELL-BASED INTERACTION CLONING | |
| | Group Art Unit 1646 | Examiner R. Li |
| <p>This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a response in the above identified application.</p> <p>The requested extension and appropriate non-small-entity fee are as follows (check time period desired):</p> <div style="display: flex; justify-content: space-between;"> <div style="width: 70%;"> <input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1)) <input type="checkbox"/> Two months (37 CFR 1.17(a)(2)) <input type="checkbox"/> Three months (37 CFR 1.17(a)(3)) <input type="checkbox"/> Four months (37 CFR 1.17(a)(4)) <input type="checkbox"/> Five months (37 CFR 1.17(a)(5)) </div> <div style="width: 25%; text-align: right;"> \$110.00 \$ _____ \$ _____ \$ _____ \$ _____ </div> </div> <p><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$ ____.</p> <p><input checked="" type="checkbox"/> A check in the amount of the fee is enclosed.</p> <p><input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.</p> <p><input type="checkbox"/> The Commissioner has already been authorized to charge fees in this application to a Deposit Account.</p> <p><input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>20-1469</u>.</p> <p>I have enclosed a duplicate copy of this sheet.</p> <p>I am the <input type="checkbox"/> applicant/inventor.</p> <p style="margin-left: 40px;"><input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71</p> <p style="margin-left: 80px;">Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).</p> <p><input checked="" type="checkbox"/> attorney or agent of record.</p> <p><input type="checkbox"/> attorney or agent under 37 CFR 1.34(a).</p> <p style="margin-left: 40px;">Registration number if acting under 37 CFR 1.34(a):</p> <p>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</p> <div style="display: flex; justify-content: space-between; margin-top: 20px;"> <div style="width: 45%;"> <p style="text-align: center;">January 27, 2004</p> <hr style="width: 80%; margin: 0 auto;"/> <p style="text-align: center;">Date</p> </div> <div style="width: 45%; text-align: center;">  <hr style="width: 80%; margin: 0 auto;"/> <p style="text-align: center;">Signature</p> </div> </div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div style="width: 45%;"> <p>01/29/2004 YP01LITE1 00000103 09771425</p> <p style="text-align: center;">110.00 OP</p> </div> <div style="width: 45%; text-align: center;"> <p>Andrew F. Nilles Reg. No. 47,825</p> <hr style="width: 80%; margin: 0 auto;"/> <p style="text-align: center;">Typed or printed name</p> </div> </div> <p style="font-size: small;">NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below".</p> <p><input checked="" type="checkbox"/> *Total of 1 forms are submitted.</p> | | |
| CERTIFICATE OF MAILING | | |
| Express Mail Label Number: <u>EL994821877US</u> | | |
| Date of Deposit: <u>January 27, 2004</u> | | |
| Person Making Deposit: <u>Christopher Haughton</u> | | |